Field Trip Attendance Log

Event / Location					_ Date:	:/		Time:	:	am / pm
Driver:	Additiona	I Staff:								
		Staff are required to initial each box after visually accounting for each child at the following times:								
Child's Name:	Signed Parent Permission	Child Care Facility		Field Trip Site					Child Care Facility	
		Center	Van	Exiting Van	On Lo :	cation (fill in	time):	Entering Van	Van	Center
	Y/N									
	Y/N									
	Y/N									
	Y/N									
	Y/N									
	Y/N									
	Y/N									
	Y/N									
	Y/N									
	Y/N									